Canadian Community Health Survey

topics

Cycle 1.1 Report 5

Chronic Conditions in Nova Scotia

July 2004

The Canadian Community Health Survey (CCHS) is a series of health surveys being conducted by Statistics Canada. Its purpose is to provide regular and timely cross-sectional estimates of health determinants, health status, and health system utilization for 136 regions across the country. This survey adds to Canada's capacity for in-depth analysis of health related issues in this country. Data from the first installment of the CCHS, Cycle 1.1, was collected between May and December 2001, and released in May 2002.

CCHS Cycle 1.1 provided a great deal of information valuable to decision and policy-makers. A general overview of Cycle 1.1 data was released by the Performance Measurement and Health Informatics section (PMHI) of the Nova Scotia Department of Health in October 2002 and is available at <www.gov.ns.ca/heal/downloads/cchs_dha.pdf>.

Highlights

- More than two thirds of Nova Scotians aged 12 and over report having a chronic condition.
- Seventy-nine percent of respondents who report having a stressful life also report having a chronic condition.
- Chronic conditions are more prevalent among physically inactive Nova Scotians.
- Arthritis is the most common chronic condition reported among both males and females.

NOVA SCOTIA
Department of Health

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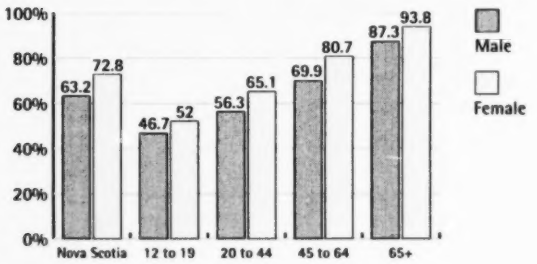
Chronic Conditions

More than two thirds (68.1%) of Nova Scotians aged 12 years and over report having a chronic condition. The CCHS defines a chronic condition as a condition diagnosed by a health professional that has lasted, or is expected to last, six months or more. Some of the most prevalent conditions that were asked about in the CCHS are diabetes, heart disease, arthritis, and high blood pressure. Chronic conditions show a significantly higher prevalence among females compared to males in Nova Scotia (73% of females versus 63% of males) (figure 1).

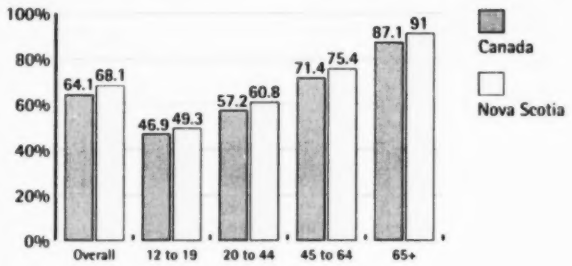
FIGURE 1 Prevalence of chronic conditions by age and sex, Nova Scotia



* Indicates a significant difference

The prevalence of chronic conditions increases with age. Forty-nine percent of Nova Scotians between the ages of 12 and 19 report having a chronic condition. This rate increases to 91.0% for respondent's aged 65 and over. This trend is consistent nationally. Forty-seven percent of Canadians between the ages of 12 and 19 report having a chronic condition. The national rate increases to 87.1% for people aged 65 and over (figure 2).

FIGURE 2 Prevalence of chronic conditions by age and sex, Nova Scotia and Canada



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Seventy-four percent of people living in the Cape Breton District Health Authority report having a chronic condition (73.6%), which is the only district to have a rate that differs significantly from the provincial rate (68.1%). When comparing the district health authorities within the province, Colchester East Hants and Cape Breton have a significantly higher prevalence of chronic conditions (73.6%) than Capital Health (65.3%). Even though Colchester East Hants and Cape Breton health authorities have the same prevalence, Colchester East Hants does not differ significantly from the provincial rate due to small sample sizes.

Chronic conditions are also more common among people in the lower income groups. Seventy-seven percent of Nova Scotians who report being in the lowest income group report having a chronic condition, as opposed to 64% of people in the highest income group. Although chronic conditions are most prevalent in the lowest income group, this alone does not imply a direct cause and effect relationship. Having a chronic condition may cause you to fall in the lowest income group or being in the lowest income group may result in the development of a chronic condition.

Levels of "social support"[1] have been measured by the CCHS. The prevalence of chronic conditions among these different levels of social support differ significantly. Seventy-three percent of Nova Scotians with "low levels

of social support" report having a chronic condition. This is significantly higher than Nova Scotians who report "medium" (66%) or "high" (65%) levels of support. When the relationship between stress and social support is examined a similar picture emerges. The proportion of Nova Scotians reporting a stressful life is significantly higher among those reporting the lowest level of social support compared to that of the two higher levels. This may explain, in part, the relationship seen between social support and chronic conditions. With a higher proportion of people reporting high stress levels among the lowest level of social support, one would also expect to see a higher prevalence of chronic conditions among those with high stress levels.

Chronic Conditions and General Health

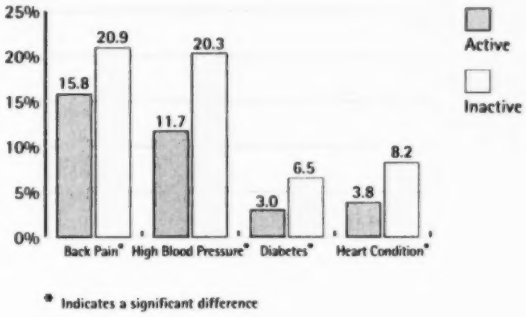
People who think of their life as stressful (extremely or quite a bit stressful) on most days, are more likely to report having a chronic condition than the people who don't report having a stressful life (a bit of stress, not very much stress or no stress). Seventy-nine percent of respondents who report having a stressful life also report having a chronic condition, while only 68% of people who report they don't have a stressful life report having a chronic condition.

Forty percent of Nova Scotians are "overweight," by the standards of the Canadian Body Mass Index (BMI)[2] Of the people that report having a chronic condition, 42.7% of them are "overweight." When looking at the prevalence of chronic conditions among the four different BMI groups (underweight, acceptable weight, some excess weight, overweight), they each differ significantly from one and another. Five percent of people who report having chronic conditions are "underweight;" 36% are at an "acceptable weight;" 16% have "some excess weight," and 43% are "overweight." Note that the BMI does not apply to people under the age of 20, over the age of 65, pregnant or nursing women, or very muscular athletes.

Types of Chronic Conditions

The most common chronic conditions are more prevalent among physically inactive Nova Scotians. Certain chronic conditions are significantly more prevalent among people who are physically inactive versus those who are active: back pain (20.9% vs 15.8%), high blood pressure (20.3% vs 11.7%), diabetes (6.5% vs 3.0%) and heart conditions (8.2% vs 3.2%). It is likely that there exists a two-way relationship between chronic conditions and physical activity. Chronic conditions may be more prevalent among physically inactive people, but that doesn't mean being physically inactive definitely causes chronic conditions. Living with a chronic condition may limit your ability to be active, thus resulting in a physically inactive lifestyle (figure 3).

FIGURE 3 Prevalence of chronic conditions by activity level



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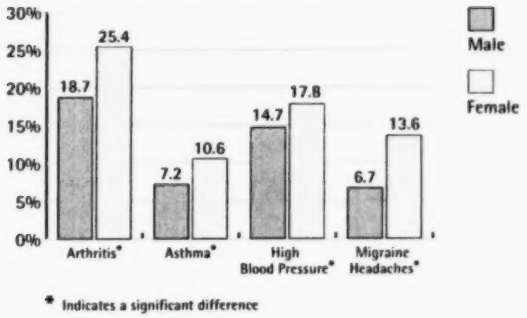
Some chronic conditions show significant differences between the sexes. Arthritis is the most common chronic condition reported among both males and females. Of the respondents who report having a chronic condition, 22% report that condition to be arthritis. Of these, 19% are male and 25% are female, which is statistically significant. Other conditions asked about in the CCHS that differ significantly between males and females are asthma, high blood pressure, and migraine headaches (figure 4). No chronic conditions in the survey are found to be significantly more prevalent in males.

FIGURE 4 Prevalence of chronic conditions by sex



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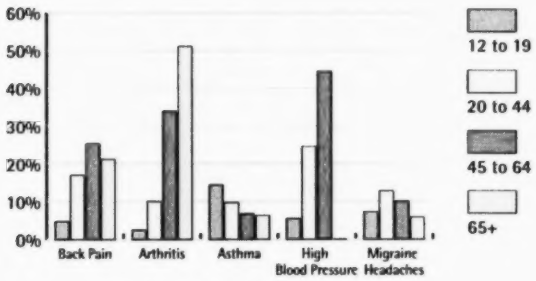
The prevalence of particular conditions varies across age groups (figure 5). One would expect that the types of chronic conditions people have are related to their age. Asthma is the most common chronic condition among Nova Scotians between the ages 12 and 19. People between the ages 20 and 44 report having back problems more than any other condition, while people aged 45 and over report having arthritis more than any other condition.

FIGURE 5 Age structure of selected chronic conditions



Other Resources

More information on the CCHS is available at <www.statcan.ca/english/concepts/health/cchsinfo.htm>.

Find out more about chronic conditions at <www.agingsociety.org/agingsociety/pdf/chronic.pdf>.

Partnership for Solutions, Johns Hopkins University, "Chronic Conditions: Making the Case for Ongoing Care" at <www.partnershipforsolutions.org/DMS/files/chronicbook2002.pdf>.

References

1 The distribution of MOS (Medical Outcomes Study) social support index scores within the CCHS sample was divided into thirds. People who scored in the bottom third (scores of 0 to 63) were rated as having "low levels of social support." Those in the middle third (scores of 64 to 73) were rated as having "medium levels of social support." Those in the highest third (scores of 74 to 76) were rated as having "high levels of social support."

2 The Body Mass Index (BMI) evaluates your weight in relation to your height. It helps to determine if you are at a healthy weight but is not a direct measure of body fat.